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POSITION	RH CIALS	ID NO.	DATE
FEE DETERMINATION	,		
O.I.P.E. CLASSIFIER	~5~~	3 /-	3/2
FORMALITY REVIEW	int	571	04/24/1
RESPONSE FORMALITY REVIEW			17 4 70

## INDFX OF CLAIMS

~		N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

	nestricteu 0	•
Claim Date	Claim Date	Claim Date
_	Pinal Original	Final
18/1/15	51	101
[2] 2] 1   [ ] 1   1   1   1   1   1   1   1   1   1	52	102
3 3 1 1	53	103
4 4 7 7 1	54	104
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[41]	91	141
42	92	142
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47	197	147
48 49	98	748
50	100	149
		<u> </u>

If more than 150 claims or 10 actions staple additional sheet here

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